

# ● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>10/649, 131</u>	Examiner : <u>McIntosh</u>	GAU : <u>1623</u>
From: <u>DP</u>	Location: <u>(IDC)</u> FMF FDC	Date: <u>7/25/05</u>
Tracking #: <u>06103835</u>		Week Date: <u>5/9/2005</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>1-6-2005</u>	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	<u>4-6-2005</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Renumbered claim 4 and 5 Coriginal claim 6 and 7 depends on a concealed original claim 4 and 5.

Thank you.

[XRUSH] RESPONSE: Change the dependency of claims ~~6-7~~ 6-7 to depend from claim 1. See attached examiners amendment. Thanks -

INITIALS: Tm

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
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